## THIS SPACE FOR OFFICE USE ONLY

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAS

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly) LOBBYIST PARTI NAME(Last) (First) (Middle) **TELEPHONE** NISHIHARA, Ronald G. 808/548-2912 MAILING ADDRESS (Street) FAX P.O. Box 898900 808/548-2975 (City) (State) (Zip Code) Mililani, HI 96789 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE n/a MAILING ADDRESS (Street) FAX (City) (State) (Zip Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR	TELEPHONE		
Dole Food Company Hawaii, div	rision of Dole Food Company, Inc.	808/621-3200	
MAILING ADDRESS (Street)		FAX	
1116 Whitmore Avenue			
(City)	(State)	(Zip Code)	
Wahiawa, HI 96786			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
Ronald Nishihara		808/548-2912	
Ronald Nishihara  MAILING ADDRESS (Street)		808/548-2912 FAX	
MAILING ADDRESS (Street)	(State)	FAX	

Agriculture	Education	Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections		
PART IV CERTIFICATION	OF LOBBYIST			
	information furnished above is, to	the best of my knowledge,	correct and complete.	
		12/29	104	
(Signature of Lobbyist)		/ (	/ (Date)	
PART V AUTHORIZATION	N TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
Brian Orlopp	V	Vice President & General Manager		
ME OF ORGANIZATION (if applicable)		TE	TELEPHONE	
Dole Food Company Hawaii, division of Dole Food Company, Inc.			808/621-3200	
AILING ADDRESS (Street)			X	
1116 Whitmore Avenue		808	8/621-7410	
(City)	(State)	(Zip Code	)	
Wahiawa, HI 96786				

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

(Date)

PART III